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· COVER LETTER

TO: Registration Section Division of Corporations	
Micrell Real Estate LLC	
	mited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Cha	nge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	er to the following:
Joseph Michael Dumbrell	
Name of Person	
Micrell Real Estate LLC	
Firm/Company	
611 Druid Rd. E. Suite 715	
Address	
Clearwater, Fl. 33756	
City/State and Zip Code	
mdumbrell@seniorhelpers.com	
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please	call:
Michael Dumbrell 7	252 6737
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amoun	t:
☐ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Clearwater, Fl. 33756	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		, , .
Clearwater, Fl. 33756		
12/03/2015	 L15	000203730
Date of filing/registration in Florida	4.	Document number
a) Joseph Michael Dumbrell		
Registered Agent and Registered Office shown on the records of 921 S. Missouri Avenue	the Florida Dept	of State:
Registered Office Address (MUST BE FLORIDA STREET) Clearwater	(DDRESS)	
	33756	TILE TOTAL TO
, FL		
)		RIZ R
Enter name of NEW Registered Agent and/or NEW Registered	Office address:	
		ORDA F 16
NEW Registered Office Address:		
611 Druid Rd. E. Suite 715		
Clearwater	33756	
t limited liability company is not organized under the law hange or changes are made, the Florida street address of a will be identical. Or, in the case of a Florida limited liawere authorized by an affirmative vote of the members of tricles of organization or the operating agreement of the	vs of the State the registered ability compa f the limited limited liabil	d office and the business office of the registere ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in
nature of a member authorized representative of a member		Printed or typed name of signee
reby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete bligations of my position as registered agent as provided rely reflect a change in the resistence office address, I have been under the control of the change in the resistence of the control of the change in the resistence of the control of the change in the resistence of the control of the change in the resistence of the control of the change of	ee to act in th performance I for in Chapt vereby confirt	nis capacity. I further agree to comply with the of my duties, and I am familiar with and accep ter 605, F.S. Or, if this document is being filed in that the limited liability company has been